

OFFICE USE ONLY  
 Log No. 81874  
 Permit No. \_\_\_\_\_  
 Basin 102  
 NOTICE OF INTENT NO. 44536

PRINT OR TYPE ONLY  
 DO NOT WRITE ON BACK

WELL DRILLER'S REPORT

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.340

1. OWNER Kathy Elson ADDRESS AT WELL LOCATION 1320 Crest Dr  
 MAILING ADDRESS N/A Silver Springs, NV  
 2. LOCATION SW 1/4 NE 1/4 Sec 13 T 17 N/S R 24 E Lyon County  
 PERMIT NO. N/A Parcel No. 17-241-21 Lot 8 Subdivision Name \_\_\_\_\_

3. WORK PERFORMED  
 New Well  Replace  Recondition  
 Deepen  Abandon  Other \_\_\_\_\_  
 4. PROPOSED USE  
 Domestic  Irrigation  Test  
 Municipal/Industrial  Monitor  Stock  
 5. WELL TYPE  
 Cable  Rotary  RVC  
 Air  Other Hand

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
<u>Gravelly Soil</u>		<u>1</u>	<u>4</u>	
<u>Gravelly</u>		<u>4</u>	<u>26</u>	
<u>Clay Sand</u>		<u>26</u>	<u>72</u>	
<u>Sand Gravel</u>		<u>72</u>	<u>168</u>	
<u>Clay / Gravel</u>		<u>168</u>	<u>185</u>	
<u>(Cement Grout)</u>				
<u>100-185</u>				
<u>drill'd out</u>				
<u>Sand, Clay</u>		<u>185</u>	<u>215</u>	
<u>Shell (Black)</u>		<u>215</u>	<u>243</u>	
<u>Clay</u>		<u>243</u>	<u>261</u>	
<u>Shell Broken</u>		<u>261</u>	<u>283</u>	
<u>Shell</u>		<u>283</u>	<u>440</u>	

8. WELL CONSTRUCTION  
 Depth Drilled 440 Feet Depth Cased 440 Feet  
 HOLE DIAMETER (BIT SIZE)  
 From To  
10 5/8 Inches 1 Feet 60 Feet  
8 3/4 Inches 60 Feet 320 Feet  
6 1/8 Inches 320 Feet 440 Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
<u>6 1/8</u>	<u>13</u>	<u>1.888</u>	<u>1</u>	<u>320</u>
<u>5"</u>		<u>1.888</u>	<u>320</u>	<u>440</u>

Perforations:  
 Type perforation Machine Part  
 Size perforation 1/8" x 2 x 10"  
 From 300 feet to 320 feet  
 From 400 feet to 420 feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

Surface Seal:  Yes  No Seal Type:  
 Depth of Seal 60"  Neat Cement  
 Placement Method:  Pumped  Cement Grout  
 Poured  Concrete Grout  
 Gravel Packed:  Yes  No  
 From \_\_\_\_\_ feet to \_\_\_\_\_ feet

9. WATER LEVEL  
 Static water level 296 feet below land surface  
 Artesian flow \_\_\_\_\_ G.P.M. \_\_\_\_\_ P.S.I.  
 Water temperature 62 °F Quality OK

Date started 8/15/00, 19\_\_\_\_  
 Date completed 8/24/00, 19\_\_\_\_

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	<u>10-10</u>		<u>5 1/2 hrs</u>

10. DRILLER'S CERTIFICATION  
 This well was drilled under my supervision and the report is true to the best of my knowledge.  
 Name Leach Drilling INC Contractor  
 Address P.O. Box 599 Contractor  
S.S. NV 89429  
 Nevada contractor's license number issued by the State Contractor's Board. 0031841  
 Nevada driller's license number issued by the Division of Water Resources, the on-site driller. 1826  
 Signed [Signature]  
 By driller performing actual drilling on site or contractor  
 Date 8/1/00

RECEIVED  
 00 SEP 18 PM 12:28  
 STATE ENGINEERS OFFICE